	FORM 3 AMENDED REPORT							
APPLICATION FOR PERMIT TO DRILL					1. WELL NAME and NUMBER NBU 688-30E			
2. TYPE OF WORK DRILL NEW WELL REENTER P&A WELL DEEPEN WELL					3. FIELD OR WILDCAT NATURAL BUTTES			
4. TYPE OF WELL Gas Well Coalbed Methane Well: NO					5. UNIT or COMMUNITIZATION AGREEMENT NAME NATURAL BUTTES			
6. NAME OF OPERATOR KERR-MCGEE OIL & GAS ONSHORE, L.P.					7. OPERATOR PHO	7. OPERATOR PHONE 307-752-1169		
8. ADDRESS OF OPERATOR P.O. Box 173779, Denver, CO, 80217						9. OPERATOR E-MAIL Laura.Gianakos@anadarko.com		
10. MINERAL LEASE NUMBER (FEDERAL, INDIAN, OR STATE)				12. SURFACE OWNERSHIP				
ML22793			IAN STATE (FEE (FEDERAL INDIAN STATE FEE			
13. NAME OF SURFACE OWNER (if box 12 = 'fee')					14. SURFACE OWNER PHONE (if box 12 = 'fee')			
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')					16. SURFACE OWNER E-MAIL (if box 12 = 'fee')			
17. INDIAN ALLOTTEE OR TRIBE NAME (if box 12 = 'INDIAN')		18. INTEND TO COM MULTIPLE FORMATI		ION FROM	19. SLANT			
(II BOX 12 = INDIAN)		YES (Submit Commingling Application) NO			VERTICAL DIRECTIONAL HORIZONTAL			
20. LOCATION OF WELL	FO	OTAGES	QTR-QTR	SECTION	TOWNSHIP	RANGE	MERIDIAN	
LOCATION AT SURFACE	ATION AT SURFACE 702 FNL 2029 FEL		NWNE	30	10.0 S	21.0 E	S	
Top of Uppermost Producing Zone 702 FN		IL 2029 FEL	NWNE	30	10.0 S	21.0 E	S	
At Total Depth	702 FNL 2029 FEL		NWNE	30	10.0 S	21.0 E	S	
21. COUNTY UINTAH 22. DISTANCE TO NEAREST 702								
25. DISTANCE TO NEARES (Applied For Drilling or Co								
27. ELEVATION - GROUND LEVEL 5260	28. BOND NUMBER			29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE 49-225				
		Aī	TTACHMENTS		<u> </u>			
VERIFY THE FOLLOWING	ARE ATTACH	ED IN ACCORCANO	CE WITH THE U	TAH OIL AND	GAS CONSERVATI	ON GENERAL RU	JLES	
WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER				COMPLETE DRILLING PLAN				
AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)				FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER				
DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)				TOPOGRAPHICAL MAP				
NAME Kaylene Gardner TITLE Regulatory Administrator			r	PHONE 435 781-9111				
SIGNATURE DATE 03/02/2010				EMAIL kaylene_gardner@eogresources.com				
APPROVAL APPROVAL APPROVAL								
		Permit Manager	7					

⊇,